



Form

North Dakota Office of State Tax Commissioner

**ND-1 Individual income tax return 2006****Space Required  
for Barcode**

- A. Filing status used** ☐ 1. Single  
on federal return: ☐ 2. Married filing jointly  
(Fill in only one) ☐ 3. Married filing separately  
- enter spouse's name ☐ 4. Head of household  
☐ 5. Qualifying widow(er) with  
dependent child

XXXXXXXXXXXXXXXXXXXX

- B. School district code:** \_\_\_\_\_  
(See page 17)
- Fill in only if applicable:** ☐ Amended  
(See page 9) ☐ Extension

Fill in if this is a ☐ (CF)  
**COMPOSITE RETURN**If fiscal year filer, enter fiscal year end:  
(See page 9)

- C. Income source code:** \_\_\_\_\_  
(See page 9)
- Were you required to pay** ☐ Yes  
estimated federal income tax ☐ No  
for 2006? (See page 9)

XX/XX/XXXX

**MN/MT RECIPROCITY** ☐ State \_\_\_\_\_  
(See page 9)

**D. Federal adjusted gross income** from line 37 of Form 1040, line 21 of Form 1040A,  
or line 4 of Form 1040EZ \_\_\_\_\_ (SX) D \_\_\_\_\_

**1. Federal taxable income** from line 43 of Form 1040, line 27 of Form 1040A,  
or line 6 of Form 1040EZ (If zero, see page 9 of instructions) \_\_\_\_\_ (SS) 1 \_\_\_\_\_

**Additions**

2. Lump-sum distribution from Federal Form 4972 \_\_\_\_\_ (NA) 2 \_\_\_\_\_
3. Loss from pass-through entity subject to North Dakota's  
financial institution tax (Attach statement from entity) \_\_\_\_\_ (NB) 3 \_\_\_\_\_
4. Adjustment to federal taxable income, if claiming  
planned gift credit (From Schedule PG, line 17) \_\_\_\_\_ (NK) 4 \_\_\_\_\_
5. Add lines 1, 2, 3, and 4 \_\_\_\_\_ 5 \_\_\_\_\_

**Subtractions**

6. Interest from U.S. obligations  
(Attach supporting statement) \_\_\_\_\_ (SN) 6 \_\_\_\_\_
7. Net long-term capital gain exclusion  
(From worksheet on page 10 of instructions) \_\_\_\_\_ (NC) 7 \_\_\_\_\_
8. Exempt income of a Native American \_\_\_\_\_ (S4) 8 \_\_\_\_\_
9. Benefits received from U.S. Railroad Retirement Board  
(Attach copy of Form RRB-1099, RRB-1099-R, or both) \_\_\_\_\_ (S5) 9 \_\_\_\_\_
10. Income from pass-through entity subject to North Dakota's  
financial institution tax (Attach statement from entity) \_\_\_\_\_ (S6) 10 \_\_\_\_\_
11. Renaissance zone income exemption  
(Attach Schedule RZ) \_\_\_\_\_ (S7) 11 \_\_\_\_\_
12. New or expanding business income exemption under  
N.D.C.C. ch. 40-57.1 (Attach supporting statement) \_\_\_\_\_ (NH) 12 \_\_\_\_\_
13. National Guard/Reserve member federal active duty  
pay exclusion (Attach copy of mobilization orders) \_\_\_\_\_ (NI) 13 \_\_\_\_\_
14. Nonresident only: Servicemembers Civil Relief Act  
adjustment (See page 11 of instructions) \_\_\_\_\_ (NJ) 14 \_\_\_\_\_
15. Human organ donor expense deduction  
(Attach supporting statement) \_\_\_\_\_ (NL) 15 \_\_\_\_\_
- 16. North Dakota taxable income.** Subtract lines 6 through 15 from line 5.  
If less than zero, enter 0 \_\_\_\_\_ (ND) 16 \_\_\_\_\_

- 17. Tax -** **►** If a **full-year resident**, enter tax from Tax Table on page 18 of instructions.  
If you have farm income, see page 12 of instructions.

**►** If a **full-year nonresident** or a **part-year resident**, enter tax from  
Schedule ND-1NR, line 21. \_\_\_\_\_ (SB) 17 \_\_\_\_\_



18. Enter your **tax** from line 17 of page 1 ----- 18 \_\_\_\_\_

**Credits**

19. Credit for income tax paid to another state  
(Attach Schedule CR) ----- (SD) 19 \_\_\_\_\_

20. Family member care credit (Attach Schedule FC) ----- (S2) 20 \_\_\_\_\_

21. Renaissance zone credit (Attach Schedule RZ) ----- (S3) 21 \_\_\_\_\_

22. Ag commodity investment credit (from worksheet on page 11  
of instructions) (Attach copy of investment reporting form) --- (NE) 22 \_\_\_\_\_

23. Seed capital investment credit (from worksheet on page 12  
of instructions) (Attach copy of investment reporting form) --- (NG) 23 \_\_\_\_\_

24. Credit for planned gift to qualified North Dakota nonprofit  
organization. (Attach Schedule PG) ----- (NM) 24 \_\_\_\_\_

25. Credit for biodiesel fuel supplier (Attach supporting statement) (NN) 25 \_\_\_\_\_

26. Credit for biodiesel fuel seller (Attach supporting statement) -- (NO) 26 \_\_\_\_\_

27. **Net tax liability.** Subtract lines 19 through 26 from line 18. *If less than zero, enter 0* --- (SE) 27 \_\_\_\_\_

**Withholding and/or tax already paid**

28. North Dakota withholding (Attach W-2s, 1099s, and K-1s) --- (SF) 28 \_\_\_\_\_

29. Estimated tax paid, including extension payment on 2006  
Form 400-EXT and overpayment applied from 2005 return --- (S&) 29 \_\_\_\_\_

30. Total payments. Add lines 28 and 29 ----- 30 \_\_\_\_\_

**Refund**

31. **Overpayment** - If line 30 is MORE than line 27, subtract line 27 from line 30 and enter result;  
otherwise, go to line 36. *If result is less than \$5.00, enter 0* ----- (SG) 31 \_\_\_\_\_

32. Amount of line 31 that you want applied to your 2007  
estimated tax ----- (SQ) 32 \_\_\_\_\_

33. Amount of line 31 that you wish to contribute to the Watchable  
Wildlife Fund ----- (SP) 33 \_\_\_\_\_

34. Amount of line 31 that you wish to contribute to the Trees  
For ND Program Trust Fund ----- (SW) 34 \_\_\_\_\_

35. **Refund.** Subtract lines 32 through 34 from line 31. *If result is less than \$5.00, enter 0* -- (SR) 35 \_\_\_\_\_

To **direct deposit** your refund, complete items a, b,  
and c. (See page 15.)

a. Routing number: \_\_\_\_\_  
b. Account number: \_\_\_\_\_

c. Type of account:  
☐ Checking  
☐ Savings

**Tax Due**

36. **Tax due** - If line 30 is LESS than line 27, subtract line 30 from line 27 and enter result.  
*If result is less than \$5.00, enter 0* ----- (SZ) 36 \_\_\_\_\_

37. Amount that you wish to contribute to the Watchable  
Wildlife Fund (but only if there is a tax due on line 36) ----- (SU) 37 \_\_\_\_\_

38. Amount that you wish to contribute to the Trees For ND  
Program Trust Fund (but only if there is a tax due on line 36) - (SY) 38 \_\_\_\_\_

39. **Balance due.** Add lines 36, 37, 38, and, if applicable, line 40.  
Pay to: **ND State Tax Commissioner** ----- 39 \_\_\_\_\_

40. Interest on underpaid estimated tax from Form 400-UT ----- (SO) 40 \_\_\_\_\_

I declare that this return is correct and complete to the best of my knowledge and belief.			Privacy Act - See inside front cover of booklet.	
Your signature	Date	Your daytime phone number	<input type="checkbox"/> I authorize the ND Office of State Tax Commissioner to discuss this return with the preparer identified below.	
Spouse's signature		Date	OPR <input type="radio"/> For Tax Department Use Only	
Paid preparer signature		EIN/SSN/PTIN	Date	
Print name of paid preparer		Phone no.		<input type="radio"/>

► **Attach copy of 2006  
federal income tax return**

► **Mail to:** State Tax Commissioner, 600 E. Blvd. Ave.,  
Dept. 127, Bismarck, ND 58505-0599